



Work Order (Bid Form)

AUDITOR: J SUMMERS

615-473-2343

JSUMMERS@UNITED.NET



WORK ORDER INFORMATION

Work Order Name: WO/90009MD2664/1

Work Order Type: Weatherization

Audit Name: 90009MD2664

CLIENT INFORMATION

Client Name:

Address:

Client ID: 90009MD2664

, 37203

Alt. Client ID: DAVIDSON

AGENCY INFORMATION

Agency: Metropolitan Development and Housing Agency

Agency Phone: (615) 252-8500

Address: 701 South Sixth Street
Nashville, TN 37206

Fax: (615) 252-8533

Email Address:

Company Name & License Number: _____

Contractor's Signature: _____

COMMENT

SITE BUILT: 1940
LEAD AND ASBESTOES MAY BE PRESENT

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Measures

Measure 1 Seal Ducts

Components

Inspected

Comment DUCT SEALING MEASURES:

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- 1.) MASTIC SEAL FLOOR DUCTS AND JOINTS
- 2.) MASTIC SEAL FLOOR RETURN AND JOINTS
- 3.) INSTALL AIR FILTER, LEAVE 5 FOR CLIENT 20 X 25

#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
10	Miscellaneous Su	Duct Sealing	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		

Field Notes:

Measure 2 Infiltration Redctn

Components

Inspected

Comment INFILTRATION REDUCTION MEASURES:

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- 1.) WS/ DS / SEAL INTERIOR DOOR TO BSMT
- 2.) WS/DS FRONT, BACK, AND SIDE DOORS
- 3.) REHANG FALLEN DRYWALL IN FINISHED ATTIC.
- 4.) WS/DS DOOR TO ATTIC
- 5.) SEAL PLUMBING PENETRATIONS KITCHEN AND BATH.
- 6.) WS/DS 2 KNEEWALL ACCESS DOORS.
- 7.) INSTALL CHIMINEY BALLOON (client doesn't use FP)

#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
10	Miscellaneous Su	Infiltration Reduction	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other Detail									
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Measure Sub Total:						<input type="text"/>	Sub Total:		

Field Notes:

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Measure 3 DWH Tank Insulation**Components****Inspected****Comment** 40 Gal Elec.☐

#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
1	Hot Water Equip	DHW Tank Insulation	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	DHW Tank Insulation	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Other Detail

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Measure Sub Total:**Sub Total:****Field Notes:****Measure 4 DWH Pipe Insulation****Components****Inspected****Comment** First 5 Ft.☐

#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
1	Insulation	DHW Pipe Insulation	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	DHW Pipe Insulation	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Other Detail

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Measure Sub Total:**Sub Total:****Field Notes:**

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Measure 5 Floor Ins. R-19**Components F1****Inspected****Comment** FLOOR JOISTS: 2 X 8 X 16 (BSMT)☐

#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
1	Insulation	Floor Insulation - Fiberglass Faced Batt - R-19	SqFt	1362	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	Floor Insulation - Fiberglass Faced Batt - R-19	SqFt	1362	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Other Detail

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Measure Sub Total:**Sub Total:****Field Notes:****Measure 6 Refrigerator Rplcmnt****Components****Inspected****Comment** REPLACE WITH 20 Cuf ENERGY STAR RATED TOP FREEZER, REMOVE
OLD UNIT FROM PREMISES AS PER DOE / MDHA GUIDELINES.☐

#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
10	Refrigerators	any - any	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Other Detail

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Measure Sub Total:**Sub Total:****Field Notes:**

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Measure 7 PressureRelief Piping Needed**Components****Inspected****Comment** AS PER DOE / MDHA GUIDELINES

#	Material / Labor	Description / Comment	Units	Qty	Estimated		Actual		
					Unit Cost	Total	Qty	Unit Cost	Total
1	Health and Safety	Pressure relief piping	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Labor	Labor	Each	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Other Detail

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Measure Sub Total: **Sub Total:** **Field Notes:****Work Order Grand Total:** **Grand Total:**

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